



WelbeHealth Provider Alert

Date:	December 10, 2025
From:	WelbeHealth
To:	Health Plan Providers
Type:	Informational
Subject:	Improved WelbeHealth Referral Forms
Business	PACE
State(s):	PACE - California

Improved WelbeHealth Referral Forms – Designed with Your Feedback

WE HEARD YOU

Dear WelbeHealth Contracted Providers,

As we approach the close of 2025, the WelbeHealth team is pleased to share updates to our Referral Forms, designed to make your experience smoother and more efficient.

Based on your feedback, **we have refined the forms to improve navigation and visibility of key information**, helping you quickly identify what you need and streamline the referral process.

These enhancements reflect valuable insights from our contracted providers. Our goal is to create a more user-friendly experience and better support your success in partnering with WelbeHealth.

We welcome your continued feedback to help us strengthen the way we work together. If you have questions or suggestions regarding the updated referral forms, please reach out to your **Provider Partnership Associate** directly or contact us at providers@welbehealth.com.

Thank you for your ongoing commitment to delivering exceptional care to our Participants. We truly appreciate all that you and your team do every day.

Thank you for being a valued partner.

Warm regards,
The WelbeHealth Team